PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Stop ISSUs. FEE
Commissioner for Patents

P.O. Box 1450 Alexandria, Virginia 22313-1450 or Fax (571)-273-2885

INSTRUCTIONS. This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where

CORRENT CORRESPOSITION	For	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.						
AKERMAN SEY P.O. BOX 3188 WEST PALM BEA				Pale	tiffoota'	at Massian as Yeone	mission ; deposited with the United t class mail in an envelope above, or being facermits ate indicated below.	
				Mark D.			(Сережитея явть)	
							(Seguatore)	
					7		(Detc)	
APPEICATION NO.	APPLICATION NO. ELLING DATE		FIRST NAMED INVENTOR	ATTORNEY DOCKET NO		CONFIRMATION NO.		
16/517.553	12/98/2004		Érmanus Pilippi		9526-46		3900	
TITLE OF INVERTION (S	CL HOERVICE PHI	NI EASEBANGE ONG						
APPENCTYPE	SMACL ENTRY	ISSUE PEE DOE	POSLICATION FEE DUE	PRBY PADDISSU	e feb	TOTAL PEE(S) DUE	DATE DÜE	
nonprovisional	YES	\$700	\$300	80		31000	63/29/2007	
EXAMEN	EXAMPLE		CLASS-SUBCLASS					
Walberg, teresa j		3744	165-157000					
(A) NÁMÉ OF ASSIGN	ionice address (or Cha 22) attached, fion (or "Fee Address or more recent) attach D RESIDENCE DAT/ s an assignice is idont ii 37 CFR 3.11. Comp	nge of Correspondence indication form and Use of a Customer TO BE PRINTED OF	(1) the names of spring or agents OR, alternal (2) the name of a sing registered attentey or 2 registered patent still listed, no name will be	ively," do firm (having as a agest) and the usual orings or agents. If a printed. (pa) (pa) patent. If an easign a sasignment. Y and STATE OR C	constants of up no same	es 2	n Senterfitt	
Please check the approprian		categories (will not be			stporatio	s or other private gre	up stility 🔲 Government	
An. The following for(s) are tissue Fee Publication Fee (No.) Astvance Order - # e	small enfity discount p	remitted)	4b. Payment of Fne(s): (Pis A check is enclosed D Payment by credit es The Director is hereb averpayment, to Dep	ud. Form PTO-2038	is attac	họd.	shown above) ficiency, or credit any 1 extra copy of this form).	
5. Change in Entity Status a. Applicant claims S	MALL ENTITY SUST	os. See 37 CER 1.27.	Q b. Applicant is no lo	ager claiming SMA	LL ENT	TY status. Soc 37 Ct	FR 1.27(g)(2).	
NOTE: The Esuc Pec and E interest as shown by the rec-	rubitestion Fee (If requ onls of the United Sta	ured) will not be accepted Patent and Tradema	ned firm anyone other than trk Office.	the applicant; a regi	siered al	tomey or agent; or th	e assignse or other party in	
Authorized Signature			And the second of the second o	Date 3-5-07				
	Typed or printed name Mark D. 1					40,764		

this form and/or suggestion, for reducing this burden, should be sent to the Chief information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND PEES OR COMPLETED FORMS TO THIS ADDRESS, SEND TO Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwerk Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number